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PTO/SB/31 (09-04)  
Approved for use through 07/31/2006. OMB 0651-0031  
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| <b>NOTICE OF APPEAL FROM THE EXAMINER TO<br/>THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>  |  | <b>Docket Number (Optional)<br/>REGIM 3.3-012</b>   |  |
| In re Application of<br>Philippe Msika and Antonie Piccirilli   |  |   |  |
| Application Number<br>10/088,851  |  | Filed<br>March 21, 2002                             |  |
| For USE OF A PLANT OIL PRODUCT AS AN AGENT FOR<br>INCREASING THE SYNTHESIS OF SKIN LIPIDS   |  |   |  |
| Art Unit<br>1654  |  | Examiner<br>M. C. Flood                             |  |
| Applicant hereby <b>appeals</b> to the Board of Patent Appeals and Interferences from the last decision of the examiner.  |  |   |  |
| The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))   |  | \$ 500.00   |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:  |  | \$  |  |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |  |   |  |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |  |   |  |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.   |  |   |  |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>12-1095</u> . I have enclosed a duplicate copy of this sheet. |  |   |  |
| <input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.  |  |   |  |
| I am the  |  |   |  |
| <input type="checkbox"/> applicant /inventor.   |  | <u>Samantha Kameros</u><br>Signature                |  |
| <input type="checkbox"/> assignee of record of the entire interest.<br>See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  |  | <u>Samantha M. Kameros</u><br>Typed or printed name |  |
| <input checked="" type="checkbox"/> attorney or agent of record.<br>Registration number <u>50,631</u>   |  | <u>(908) 654-5000</u><br>Telephone number           |  |
| <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34. _____  |  | <u>January 27, 2005</u><br>Date                     |  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.                            |  |   |  |

☐ \*Total of 1 forms are submitted.

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I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: January 27, 2005

Signature: Samantha Kameros

Samantha M. Kameros)